

COURT OF PROBATE
[Type or print in black ink.]

TO: COURT OF PROBATE,		DISTRICT NO.
ESTATE OF/IN THE MATTER OF		DATE OF APPLICATION

An application has been presented to the Court that LETTERS OF ADMINISTRATION be granted on said estate to:

Name and Address of Proposed Administrator:

Each of the undersigned represents that to the best of our knowledge and belief ALL of the heirs-at-law of said estate are known, are of legal age, and ALL ARE LISTED BELOW. [List names, addresses, zip codes, and relationships of the heirs-at-law.]

[Additional data on Second Sheet, PC-180, is made a part hereof.]

Each of the undersigned who is an heir-at-law, or a fiduciary for an incapable heir-at-law, appears and WAIVES PROBATE BOND REQUIREMENTS, as permitted in Rule 2.4.04 of the *Connecticut Probate Practice Book*, for the appointment of the administrator named above, and affirms that he has NO OBJECTION to the amount of probate bond less than the VALUE OF ASSETS for the faithful performance of the administrator's duties, it being understood and agreed by each of us that the assets to be distributed will not be protected by probate bond during administration of the estate.

SIGNATURE OF PARTY [Type or print name under signature.]	This instrument has been signed under the penalties of false statement.	Date Signed
Applicant		
Proposed Administrator [If not applicant]		
Heirs at law/fiduciaries for incapable heirs, as follows:		